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APPLICANTS

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** CONTINUING DATA ***** *none* *ON*** FOREIGN APPLICATIONS ***** *two* *ON*

GERMANY 103 12 451.9 03/20/2003

GERMANY 10 2004 006 286.2 02/09/2004

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/01/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS <i>16/15</i>	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

PORTABLE MAGNETIC RESONANCE SURFACE COIL UNIT WITH AN ACCESS OPENING FOR MANUAL GRIPPING

FILING FEE

RECEIVED
900

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

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<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
<input type="checkbox"/> 1.18 Fees (Issue)
<input type="checkbox"/> Other _____